

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000001947

FILED
Apr 12, 2009
Secretary of State

Entity Name: PRESIDENTIAL INSURANCE SERVICES LLC

Current Principal Place of Business:

114A PONCE DE LEON BLVD, C
MIAMI, FL 33129

New Principal Place of Business:

114A PONCE DE LEON BLVD
MIAMI, FL 33135

Current Mailing Address:

2025 BRICKELL AVE, 803
MIAMI, FL 33129

New Mailing Address:

FEI Number: 77-0723034

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAMPERT, JEFFREY
2025 BRICKELL AVE. #803
MIAMI, FL 33129 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: LAMPERT, JEFFREY
Address: 2025 BRICKELL AVE. #803
City-St-Zip: MIAMI, FL 33129

Title: MGRM () Delete
Name: RETTER, SHIRLEY
Address: 2025 BRICKELL AVE. #803
City-St-Zip: MIAMI, FL 33129

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: LAMPERT, SHIRLEY
Address: 2025 BRICKELL AVE. #803
City-St-Zip: MIAMI, FL 33129

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JEFFREY AARON LAMPERT

MR.

04/12/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date